



AA / 13c

Expedited Procedure

Our File No.: MOOB130

Date: August 2, 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No. : 10/002,668 10/002668
Applicant : Andrew James Seeley
Filed : October 31, 2001
Title : Removal of Noxious Substances from Gas Streams
TC/A.U. : 1754
Examiner : M. Medina Sanabria
Docket No. : MOOB130

RECEIVED

AUG 10

TC 1700

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

1. ☐ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.
2. ☐ A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.
3. ☐ No additional fee is required.

CERTIFICATE OF MAILING

I hereby certify that this paper is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, on August 2, 2004.

Attorney Name Marta E. Delsignore

Registration No. 32,689

Signature Marta E. Delsignore

Date of Signature August 2, 2004

08/05/2004 ZJUHAR1 00000087 060923 10002688

01 FC:1252 420.00 DA

Goodwin Procter L.L.P.
599 Lexington Avenue
New York, New York 10022

The Fee has been calculated as shown below:

| | Claims remaining after amend. (Col. 1) | Highest No. Prev. Paid for (Col. 2) | Present extra (Col. 3) | SMALL ENTITY | | | OTHER THAN A SMALL ENTITY | | |
|---|--|--|------------------------------|--------------|-----|--|------------------------------|-----|--|
| | | | | RATE | FEE | | RATE | FEE | |
| Total | * | Minus ** | = 0 | X 9 | = 0 | | X 18 | = | |
| Ind. | * | Minus *** | = 0 | X 42 | = 0 | | X 84 | = | |
| () First Presentation of Multiple Dependent Claims | | | | + 140 | = | | + 280 | = | |
| TOTAL ADDITIONAL FEE: | | | | | | | TOTAL: | | |

* If the entry in Col 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. prev. paid for" in this space is less than 20, write "20" in this space.

*** If the "Highest No. prev. paid for" in this space is less than 3, write "3" in this space.

4.(a) [x] An Extension of Time to respond to the PTO communication mailed March 26, 2004 is hereby requested. The required fee, indicated below, is enclosed herewith.

Extension for response (check only one):

| | <u>SMALL ENTITY</u> | | <u>OTHER THAN A SMALL ENTITY</u> | |
|---------------------|--------------------------|-------|--------------------------------------|--------|
| Within first month | <input type="checkbox"/> | \$ 55 | <input type="checkbox"/> | \$ 110 |
| Within second month | <input type="checkbox"/> | 210 | <input checked="" type="checkbox"/> | 420 |
| Within third month | <input type="checkbox"/> | 475 | <input type="checkbox"/> | 950 |
| Within fourth month | <input type="checkbox"/> | 740 | <input type="checkbox"/> | 1,480 |

(check and complete the next item, if applicable)

☐ An extension for has already been secured and the fee paid therefore of \$ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$.

or

(b) ☐ In the event that an extension of time is required, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.

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599 Lexington Avenue
New York, New York 10022

5. ☒ Please charge our Deposit Account No. 06-0923 in the amount of \$420.00. Two copies of this sheet are enclosed.
6. ☐ A check in the amount of \$.00 is enclosed.
7. ☒ The Commissioner is hereby authorized to charge payment of any additional filing fees are required under 37 CFR 1.16 and/or 37 CFR 1.117 associated with this communication or credit any overpayment to Deposit Account No. 06-0923. Two copies of this sheet are enclosed.

GOODWIN PROCTER L.L.P.

By: Marta E. Delsignore
Marta E. Delsignore

PTO Registration No. 32,689

Enclosures